| Effective October 1, 2001 000762 | | | | | | | | |
|---|-------------------------------|----------------------------|--------------------|--------------------------|-----------|-------------------------------|------------------------|--|
| CLAIMS AS FILED - PART I' (Column 1) (Column 2) | | | | SMALL ENTITY TYPE | | OTHER THAN OR SMALL ENTITY | | |
| TOTAL CLAIMS | | | RAT | E FEE | 7 | RATE | FEE | |
| FOR | NUMBER FILED | NUMBER EXTRA | BASIC | FEE 370.00 | OR | | | |
| TOTAL CHARGEABLE CLAIMS | 20 minus 20= | • ф | XSS | - : | 1 | wa.c. | | |
| INDEPENDENT CLAIMS | minus 3 = | 5 | X42 | | OR | | | |
| MULTIPOE DEPENDENT CLAIM PRESENT | | | | + | OR | X84≅ | | |
| Use difference in column 1 is | less than zero, enter | "0" in column 2 | +140 | | OR | +280= | | |
| CLAIMS AS AMENDED - PART II | | | | u | JOR | TOTAL | | |
| CAIMS | (Colu | | SMA | LL ENTITY | OR: | SMALL | | |
| REMAINING AFTER AMENOMENT Total . U ? Independent . K | NUM PREVK PAID | DUSLY EXTRA | RAT | ADDI- E TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| Total . 47 | Minus | 0 -27 | X\$ 9 | - 108 | OR | X\$18= | | |
| FIRST PRESENTATION OF M | Minus : | S = | X42 | | OR | X84= | | |
| | DETIFIE DEPENDENT | COAIM | +140 | s | OR | +280= | | |
| 4 | | | 10 | | 00 | TOTAL | | |
| 11 12 (Chumn 1) | (Colur | nn 2) (Column 3) | ADDIT. F | EELP | 70 | ADDIT. FEE | | |
| CLAIMS REMAINING AFTER AMENDMENT Total Independent | HIGH NLM PREVK PAID. | BER PRESENT EXTRA | RATI | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| Total . U7 | Minus | 7.0 | X\$ 9 | | OR | X\$18 <i>€</i> | . FEE | |
| Independent • 8 | Minus ••• | 8 (1) | X42: | Λ | | X84= | | |
| FIRST PRESENTATION OF M | ULTIPLE DEPENDENT | CLAIM [|] ``` | + | OR | 7.072 | \ | |
|)OK | | | +140 | | OR | +280= | | |
| 2 Wiles | | | ADOIT. | | OR | ADDIT. FEE | | |
| CLAIMS | (Colur | nn 2) ((Column 3) | ۱ | | | | ٠ | |
| REMAINING AFTER AMENDMENT | NUM PREVIC PAID | BER PRESENT DUSLY EXTRA | RATI | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| Total · U 7 | Minus • 4 | 7:11 | X\$ 9 | 7 | OR | X\$183 | ·. | |
| Total • U 7 | Minus see | 8-0 | X42: | \ — | OR | X84= | | |
| FIRST PRESENTATION OF M | ULTIPLE DEPENDENT | CLAIM | ! | | JOK | | 1 | |
| * If the entry in column 1 is tess than t | he antry in column 2, write | -70" in column 3. | +140 | _ i | SP | +280= | . \ | |
| "If the "Highest Number Previously Paid For IN THIS SPACE is less than 20, enter "20." ADDIT. FEE OR ADDIT. FEE | | | | | | | | |
| The Trighest Number Previously Peid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | |
| ORM PTO-473 (Rev. 8/01) | | | Patent and To | edemants Office | 15 AC | PARTMENT OF | COMMERCE | |

Application or Docket Number